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REQUISITION SHEET MUST BE ATTACHED
(Applies when agenda item requires a specific payment)

OKLAHOMA COUNTY
BUDGET BOARD OF OKLAHOMA COUNTY

AGENDA ITEM REQUEST SHEET

For the: **November 19, 2009** Agenda
(Day of Meeting) (Date and Year of Meeting)

DEPT.: **County Clerk's HR/Benefits Dept.**
(Department Requesting this item)

BY: **Carolynn Caudill, County Clerk**
(Contact person for this Item)

EXT. **1865**
(Contact's extension)

NAME OF FUND: N/A

AGENDA ITEM DESCRIPTION: Discussion and possible action concerning options for the Oklahoma County Health and Dental Plans regarding accepting a Certificate of Creditable Coverage in order to waive medical underwriting.

(ALL NECESSARY DOCUMENTATION MUST BE ATTACHED FOR APPROVAL)

APPROVED BY D.A.
(If Applicable)

APPROVED BY PURCHASING
(If Applicable)

Assistant District Attorney

Purchasing Agent

APPROVED BY MIS
(If Applicable)

APPROVED BY ENGINEER
(If Applicable)

MIS Director

County Engineer

Number of ORIGINAL DOCUMENTS you have attached: _____. **NOTE:** The County Clerk will keep one original and will return the remaining originals to you. If you provide only one original, the Board Secretaries will return one photocopy to you. However, if you have special circumstances that require the County Clerk to *(check one)*: ____ keep more than one original; or ____ return all originals to you, please describe them for the County Clerk's consideration: _____

Special Instructions: The County Clerk's Benefits department will provide confidential packets to all elected officials for this agenda item.

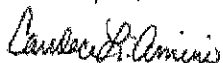
November 19, 2009

The following are options that the County may consider: (May choose one or any combination of a. thru g.)

1. The following areas can be modified in the plan should the County choose to comply:
 - a. Limitations on preexisting condition exclusion periods.
 - b. Special enrollment periods.
 - c. Prohibitions against discriminating against individual participants and beneficiaries based on health status.
 - d. Standards relating to benefits for mothers and newborns.
 - e. Parity in the application of certain limits to mental health benefits.
 - f. Required coverage for reconstructive surgery following mastectomies.
 - g. Coverage of dependent students on medically necessary leave of absence
2. Modify the Plan's language to waive Medical Underwriting for individuals who have elected not to apply for the County's coverage when initially eligible who can provide evidence of continuous coverage (without more than a 63 day break in coverage) and allow special enrollment. The proof of creditable coverage could, or could not, reduce their pre-existing condition limitation period by the number of months they previously had coverage.
3. Do away with Medical Underwriting all together and allow special enrollment for individuals who have elected not to apply for the County's coverage when initially eligible. Those people who enroll in the Plan late would be considered late entrants and would be subject to the 18 months for pre-existing conditions instead of the normal 12 months.

Please contact me if you have any questions. By the way, I will be out of the office on Monday and Tuesday of next week on vacation. I will be glad to discuss with you on my return to the office on Wednesday or you may contact Pat, Carol M or Peggy in my absence.

Thank you,



Candace L. Amini

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